DECLARATION AND I					
	POWER ATION	OF ATTORNEY	ATTORNEY (DOCKET NO. PDI	1010011536-1
As a below named inve	ntor, I h	ereby declare that:			
		on and citizenship are as	s stated below next to	o my name;	original first
I believe I am the origin and joint inventor (if plu a patent is sought on the	ıraı nam 1e inven	tion entitled:	the subject matter wh	nich is claimed	and for which
Uniform Force Hydrosta					
the specification of wh	ich is at	tached hereto unless th	e following box is che	ecked:	instina
() was filed on	as US Application No. or PCT International Application and was amended on (if applicable).				
Number		and was amende	ed on	(n applicable	s sitte este en
I hereby state that I had including the claims, as disclose all information	ave rev s amen which i	iewed and understood ded by any amendment is material to patentabili	the contents of the a	l acknowled	
Foreign Application(s) and/or	r Claim of	Foreign Priority	a i Ocalion 110 of pr	y foreign soplicat	ion(s) for patent or
I hereby claim foreign priorit	y benefit:	s under Title 35, United State I have also identified below a tion on which priority is claim			
COUNTRY		APPLICATION NUMBER	DATE FILED		UNDER 35 U.S.C. 119
				YES:	NO:
				YES:	NO:
Provisional Application			· · · · · · · · · · · · · · · · · · ·	Ctotae provisional	anolication(s) listed
	inder Title	35, United States Code Sec	tion 119(e) of any Office	States provident	
below:		APPLICATION NUMBER	FILING DATE	7	
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I hereby claim the henefit i	under Titl	e 35, United States Code, S	ection 120 of any United	prior United State	es application in the
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DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION (continued)

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ATTORNEY DOCKET NO. PDNO10011536

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nventor a Signature		Date			
•					
	~~	Citizenship:			
Full Name of # 3 joint Invento	or:				
Residence:					
Post Office Address:					
inventor's Signature		Date			
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Full Name of # 4 joint invent	tor:	Citizenship:			
Residence:					
Post Office Address:					
Inventor's Signature		Date			
Full Name of # 5 joint inven	itor:	Citizenship:			
Residence:					
Post Office Address:					
Inventor's Signature		Date			
Full Name of # 6 joint inve	ntor.	Cktzenship:			
Residence:					
Post Office Address:					
Post Office Address.					
inventor s Signature		Date			
Full Name of # 7 Joint Inve	entor:	Cttzenship:			
Residence:					
Post Office Address:					
7 000					
Inventor & Signature		Date			
Full Name of # 8 Joint inv	rentor:	Citizenship:			
Residence:					
Post Office Address:					
1 Agr Gillen Lagrange					
Inventor's Signature		Date			